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Navy & Marine Corps Medical News

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Headline: Naval medical facilities weather Hurricane Georges
From Bureau of Medicine and Surgery

PENSACOLA, Fla. - As Hurricane Georges moved from its coastal African origins, it stayed on a northwest track and affected Navy medical facilities in Puerto Rico, Florida and Mississippi, among other locations. Hospitals and clinics experienced various effects from the storm, some suffering minor water and wind damage, while others lost roofs, electrical power and suffered through flooded buildings. As the storm continued its northwest route into the Caribbean, Naval Hospital Roosevelt Roads prepared for its worst storm since Hurricane Hugo in 1989. Georges struck the Roosevelt Roads Naval complex and its hospital with winds of 110 miles per hour and gusts of 140 miles per hour. "The winds were so strong, the roof tiles were blowing like dominoes," said hospital staff member, CDR Robert Offringa, NC.

Yet as prepared as the facility was for the storm, it still sustained \$2 million in damages. With phone lines down, buildings destroyed and pleasure boats landlocked, the base looked like a child's play room with toys scattered everywhere. Still, the thorough preparation for the storm prevented more serious damages and injuries and allowed hospital personnel to continue to provide emergency assistance to those persons needing care, while working with

emergency power.

The hospital, which continues to use generator power courtesy of Naval Mobile Construction Battalion 7 based in Port Hueneme, Calif., is getting back on its feet with emergency supplies from Naval hospitals in Rota, Spain and Guantanamo Bay, Cuba.

Roosevelt Roads and the rest of the Lesser Antilles islands did not slow the storm's progress, and it roared on toward Gulf Coast military facilities. But in its travels it first ripped across Naval Air Station Key West and its Branch Medical Clinic.

According to the clinic's officer in charge, CDR Patrick Alford, MSC, the facility sustained minimal water damage because of advanced preparation.

"We packed just about everything: equipment, computers, medical records, pharmacy supplies and more in watertight boxes and moved it all to the second deck," he said. "We even sent medicines and reagents that needed refrigeration to the base commissary's refrigeration unit where there was adequate long-term emergency power."

Alford said that it was also a joint military effort that helped keep the Navy's medical effort going. The Branch Medical Clinic's designated safe haven for personnel was Patrick Air Force Base in Melbourne, Fla. During the staff's time there, they were allowed to open clinic facilities and treat patients.

"It was a clinic within a clinic," Alford said. "The Air Force medical service support was very positive." And then, as if its previous stops had rejuvenated it, Hurricane Georges attacked the Gulf Coast area September 29. Officials estimate the damage to several of the Gulf Coast's military bases will run into millions of dollars.

Naval Hospital Pensacola sustained damage to various roofs, expansion joints, and windows. Two of the facility's five operating rooms were temporarily closed because of flooding.

The 65-bed military medical and surgical facility carried an inpatient population of about 50 throughout Hurricane Georges' rumblings, including the chronically ill and many special needs patients taken in for precautionary measures.

The remainder of the Naval Hospital's 12 branch clinics were unscathed by the storm.

The Mississippi bases were also hard hit. Naval Construction Battalion Center in Gulfport and Naval Station Pascagoula suffered downed trees, downed power lines with associated loss of electrical power, structural damage and flooding. But even with the damage, electric power was restored, and their Branch Medical Clinics were again operational by October 1.

Onboard the medical facilities in the Pensacola area, damages to the Naval Hospital, Addiction Treatment Facility and the Branch Medical Clinics at Naval Air Station and Naval Air Technical Training Center were estimated to be \$415,000. The Addiction Treatment Facility, located on the

waterfront at NAS Pensacola, sustained the most damage of any of the medical facilities in the area. It had severe roof damage, interior water damage to electrical systems, ceilings, walls and flooring. The staff has temporarily moved into spaces at the Branch Dental Clinic onboard Naval Air Station Pensacola.

LT Eileen Knoble, NC, Naval Hospital Roosevelt Roads and Rod Duren, Naval Hospital Pensacola wrote the stories used in this compilation.

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Headline: Telemedicine and triservice team help save a life
By CAPT D.L. Wheeler, MSC, U.S. Naval Hospital Guam

Agana, Guam -- Not every medical complaint that U.S. Naval Hospital Guam doctors see is as unique as what confronted them in mid September.

A Sailor arrived at the hospital complaining of chest, abdominal and leg pain. Although his examination revealed no abnormalities, LT Brad Bunten, MC, noticed an unusual trait about the complaint. The Sailor's pain increased with each heartbeat. Further tests confirmed that his aorta artery, the principal artery leading from the heart, was tearing along its length.

A telemedicine consultation, using the World Wide Web, was quickly organized between U.S. Naval Hospital Guam and cardiothoracic surgeons at Tripler Army Medical Center in Honolulu, Hawaii, about 3800 miles away. The consultation confirmed the Guam doctors' diagnosis of an aortic dissection. Everyone was also in agreement that without immediate surgery, the Sailor's chances for survival were poor.

An Air Force evacuation plane was scheduled and the patient, accompanied by a Guam healthcare team, was evacuated to Queens Hospital in Honolulu for an operation that replaced a segment of his aorta. The operation was successful and the Sailor was discharged from the hospital within one week.

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Headline: Portsmouth educates merchants on dangers of teen smoking
By LT Lisa Brackenbury, Naval Medical Center Portsmouth

PORTSMOUTH, Va. -- Naval Medical Center Portsmouth staff members recently served as team leaders for local youth volunteers participating in the 1998 "Merchants Education" campaign to educate Hampton Roads area merchants about the dangers of selling tobacco products to minors.

Sponsored by the local Coalition for a Smoke-Free South Hampton Roads, the campaign is part of the statewide organization, the Campaign for Tobacco-Free Youth. It is designed to inform merchants who sell tobacco products about the short- and long-term consequences of teen smoking, as

well as to check their compliance of the Virginia law that prohibits selling any tobacco products to minors. All volunteers and team leaders were trained by Coalition adult leaders before starting their random surveys of area grocery stores, convenience stores, gas stations, and pharmacies. During each survey, an adult team leader accompanied two volunteers into the store. While the adult pretended to examine merchandise in another part of the store, the teens would attempt to purchase a tobacco product.

If the clerk rang up the sale, the teens presented him or her with a "warning" coupon and explained to the clerk that selling tobacco products to minors is against the law. If the clerk asked for identification or refused to sell the product, he or she was presented with a "thank you" coupon.

From among 141 Virginia Beach establishments, 75 percent surveyed refused to sell the teen volunteers the tobacco products - a significant increase from 36 percent in 1995. The group's education efforts have paid off, although the group would like to see an even higher compliance in the future.

The experience was positive for all who participated, including the NMCP volunteers.

"It was really cool being able to feel like I was doing something about [teen] smoking," said 15-year-old third-year participant Stephen Behnken.

"Most youth don't have a real opportunity to be involved in anything that might improve our chances to live longer."

"I was amazed at the reaction of the merchants," said Hospital Corpsman First Class Marsha Burmeister of Laboratory Medicine and adult team leader. "They were very apologetic if we found them in violation of the law."

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Headline: Data base application aid surgery process

By Dan Barber, Naval Hospital Twentynine Palms

TWENTYNINE PALMS, Calif. -- The processes of ensuring quality of care for surgical patients and easing patients' concerns were recently enhanced by development of a software application named "Surgical Assistant" at Naval Hospital Twentynine Palms.

CAPT Ken Koskella, MC, director of surgical services at Twentynine Palms, and his staff developed a database program that contained information about scheduling, case procedures, case cards for physicians, supplies used, assigning staff and cost per procedure, among other data. To complete the database project, Koskella also worked with CDR William Mock, MSC, head of the Management Information Department. Since the early development stages of Surgical Assistant, it has remained a dynamic program easy to improve as new needs arise.

Recent additions include patients' history, physical results, and consent forms. Mock said that they have also

added follow-up and cause of injury reports, which can be sent to the line community, demonstrating surgery rates, causes and outcomes from training or off-duty injuries.

"The application was built with Microsoft Access, so anybody can use it and modify it to fit their own specific needs at other commands," said Mock.

Surgical Assistant has also benefited patients. Prior to its creation, a surgery patient would have to make several appointments: evaluation, pre-op visit, anesthesia evaluation, lab work and pre-op teaching. Those trips have been reduced to one visit, when all the information is entered into the database.

The program has been very successful. After a demonstration at the Bureau of Medicine and Surgery in Washington, D.C., it was recommended for use by any Department of Defense facility.

"When we got back [from the BUMED demonstration] we started getting email requesting the application. So far we've sent it out to 15 different hospitals," said Mock.

Another benefit is that the surgeons no longer need to keep logbooks of their cases; they just punch a button and a report is automatically generated for them with all of their case histories. They also don't have to run schedules back and forth between the operating room and the clinic. Everything is done in real time, and there is no longer the need to post case schedules, which also improves patient privacy.

For more information about this application, e-mail CDR Mock at w.mock@tnp10.med.navy.mil, or CAPT Koskella at k.koskella@BRM10.med.navy.mil

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Headline: The Aviation Test Battery lands on the Internet
By Doris Ryan, Bureau of Medicine and Surgery

WASHINGTON -- Each year approximately 10,000 prospective Navy and Marine Corps aviation candidates take the Aviation Selection Test Battery, a paper-and-pencil test measuring basic math, verbal and spatial skills, offered at over 150 recruiting sites. The ASTB is given during the application process to help conserve training dollars by reducing later ground school and primary training attrition rates.

Because so many people take the test, it became an ideal candidate for computer-based testing via the Internet. Four years ago a team of aerospace experimental psychologists and software engineers at the Naval Aerospace Medical Research Laboratory, Pensacola, Fla., began creating and testing a user-friendly, computer-based version of the ASTB called the Automated Pilot Examination or APEX test.

According to LT Henry Williams, MSC, the principal investigator, "The APEX project has truly been an interdisciplinary team effort. Software engineers and psychologists have worked together closely on its development. The advantages of the electronic test include

no booklets or answer sheets to edit and reproduce, rapid turn-around time for test results and enhanced security of test items, among other benefits.

With this system, a recruiting office that has Windows-based software and a modem or Internet connection can easily log in to the server and request a test. After the candidate takes the test, the answers are uploaded to the server, automatically scored and the recruiter receives an email with the test results. Scientists at NAMRL said that studies showed an individual's test results were not biased by taking the APEX test.

"The APEX system provides tremendous opportunities to improve aviation selection tests," said Williams. "With further development, we can include dynamic, multimedia test items that correlate to a far greater range of piloting skills than was previously possible."

For more information about NAMRL research efforts visit its Web site at <http://www.namrl.navy.mil>.

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Headline: Navy medical research reorganizes for greater efficiency

By Doris Ryan, Bureau of Medicine and Surgery

WASHINGTON - The Naval Medical Research and Development Command, which for 24 years provided a worldwide team of military and civilian scientists and technicians doing biomedical research, has disbanded.

As of October 1, 1998, the Navy Medical Research and Development Laboratories reorganized into a more efficient organization by reducing infrastructure without adversely impacting the science mission. They will continue the work that enhances the health, safety and performance of the Navy and Marine Corps during peacetime and contingency operations.

Research products will continue to meet the Navy and Marine Corps' requirements and benefit Sailors and Marines who train and work in a wide variety of military occupations around the world.

For more information on the new organization visit the web site at <http://support1.med.navy.mil/bumed/med-02/med-26/nmrdc/>.

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Headline: Bremerton physician receives national award
From American Academy of Otolaryngology

SAN ANTONIO -- CAPT Gregg S. Parker, MC, from Naval Hospital Bremerton, Wash., is among 53 ear, nose and throat specialists who received the American Academy of Otolaryngology Head and Neck Surgery's Honor Award at the annual meeting of the American Academy of Otolaryngology-Head and Neck Surgery Foundation in early September.

Since 1934, the award recognizes those who have

contributed service to the academy with presentation of an instrument course or scientific paper or participation on a continuing education committee or faculty.

The American Academy of Otolaryngology-Head and Neck Surgery is a national medical organization of 10,000 physicians who specialize in the treatment of the ears, nose, throat, and related structures of the head and neck. Its function is to advance the science and art of medicine related to otolaryngology and to represent the specialty in governmental and socioeconomic issues.

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Headline: TRICARE question and answer

Question: How can I change my address with DEERS

Answer: If you have email, you can now e-mail address changes--including address changes for geographically separated family members--to the Defense Enrollment Eligibility Reporting System (DEERS) data base. The e-mail address for DEERS is: addrinfo@osd.pentagon.mil DEERS recommends that you use all lower-case letters when typing the e-mail address.

Your e-mail should include the following: (1) Sponsor's name and Social Security Number; (2) The address change you want to make; (3) Names of other family members affected by the address change; (4) Effective date of the address information; (5) Your telephone number and area code (if available). Other information, such as the addresses for geographically separated family members mentioned earlier, will be processed if you provide it.

The DEERS mail box has been available for use since Jan. 12.

The e-mail address is an alternative for updating your mailing address information. If you don't have e-mail, here are other ways to update your records in DEERS:

- Initiating a request through your nearest military personnel office
- Calling the DEERS Support Office at one of its toll-free numbers: 1-800-334-4162 (California only), 1-800-527-5602 (Alaska and Hawaii); or 1-800-538-9552 (all other states). The best time to call the DEERS Support Office is 9 a.m.-3 p.m., Pacific Time, Wednesday, Thursday or Friday, to avoid delays;

- Faxing address changes to (408) 655-8317;
- Mailing the address-change information to the DEERS Support Office, ATTN:
COA, 400 Gigling Road, Seaside, CA 93955-6771.

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Headline: Healthwatch: Sailor designs violence prevention mentor program

By Rod Duren, Naval Hospital Penscola

PENSACOLA, Fla. - Navy medical personnel frequently

participate in efforts to better their communities. Dental Technician Second Class Mark Grissom provided a recent example of community involvement, when he contributed to a school district violence prevention program used during the 1998-99 school year.

Grissom's contribution was a mentoring program comprising more than 60 volunteers from the staff of Naval Hospital Pensacola.

Grissom, who works in the hospital's dental section, got the idea from talking with both his 7-year old, second-grade daughter and a neighbor, Petty Officer Kevin McCuistion, an instructor at Naval Technical Training Center Corry Station.

But what really brought it home, according to Grissom, a native of Hamilton, Ala., was watching the televised news of children affected by recent violence in schools throughout the United States.

"The children knew violence was going to occur prior to the event," he said. "I felt the largest problem was our children did not have the knowledge and tools to prevent these violent events from occurring. And as an organization, I felt the Navy and Department of Defense could not only offer a large volunteer base to the program but provide uniformed speakers at very little cost to the school system," said the Hackleburg (Ala.) High School graduate.

His program is designed to help change the mindset of the peer group that hearing a threat is never acceptable and should be addressed by anyone who hears it.

In that light, the school system strategies identified by its School Violence Prevention Task Force include a mentoring training program Naval hospital's 60 volunteers prior to their efforts in the county's schools. There will also be a Stop and Think Social Skills Program designed to facilitate positive student behavior and conflict resolution.

"A safe learning and working environment is one of the district's strategic aims and is directly linked to student achievement," said School Superintendent May.

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Comments about and ideas for MEDNEWS are welcome. Story submissions are encouraged. Contact MEDNEWS editor, Earl Hicks, at email: mednews@us.med.navy.mil; Telephone 202/762-3223, (DSN) 762-3223, or fax 202/762-3224.

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